

# DECLARATION FOR USA PATENT APPLICATION

(including Design and National Stage PCT)

Attorney's Docket ID:

**As a below named inventor, I hereby declare that:**

My residence, post office address and citizenship are as stated below adjacent to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: "Catheter system for performing intramyocardiac therapeutic treatment"

the specification of which:

is attached hereto.

(or)

was filed on 11 November 1999, as U.S. Application No. or PCT International Application No. PCT/EP 99/08686, and (if applicable) was amended on

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, where priority is not claimed, any foreign application for patent or inventor's certificate, or any PCT International application, having a filing date before that of the application on which priority is claimed. (   ADDITIONAL APPLICATIONS IDENTIFIED ON ATTACHED SHEET)

Prior Foreign Application No.

BO98A000691

BO99A000050

Country

ITALY

ITALY

Day/Month/Year Filed

14/12/1998

Priority Not Claimed

05/02/1999

I hereby claim the benefit under 35 U.S.C. 120 of any U.S. application(s), or 365(c) of any PCT application designating the U.S., listed below; and insofar as the subject matter of each claims of this application is not disclosed in the prior U.S. or PCT application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT filing date of this application. (   ADDITIONAL APPLICATIONS IDENTIFIED ON ATTACHED SHEET.)

U.S. or PCT Parent Application No.

Parent Filing Date (Day/Month/Year)

Parent Patent No. (if applicable)



As a named inventor, I hereby appoint the registered practitioners of LARSON & TAYLOR, PLC associated with Customer Number 000881 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to that Customer Number.

Direct all telephone calls to

at TEL (703) 739-4900 (Fax: 703-739-9577) e-mail:

PATENT, TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1000 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST INVENTOR		Citizenship	Italian
Given Name (first and middle [if any])	Gianni	Family Name or Surname	PLICCHI
Full Post Office Address	Via Luca Ghini 7		
Residence - City, State/Country (if different from PO address)	I-40138 BOLOGNA, Italy		
SIGN AND DATE HERE Inventor's Signature		Date	23/04/01

SECOND JOINT INVENTOR (if any)		Citizenship	Italian
Given Name (first and middle [if any])	Tonino	Family Name or Surname	BOMBARDINI
Full Post Office Address	Via Amendola 43		
Residence - City, State/Country (if different from PO address)	I-40026 IMOLA, Italy		
SIGN AND DATE HERE Inventor's Signature		Date	23/04/01

THIRD JOINT INVENTOR (if any)		Citizenship	Italian
Given Name (first and middle [if any])	Emanuela	Family Name or Surname	MARCELLI
Full Post Office Address	Via Gasparrini 33		
Residence - City, State/Country (if different from PO address)	I-62100 MACERATA, Italy		
SIGN AND DATE HERE Inventor's Signature		Date	23/04/01

FOURTH JOINT INVENTOR (if any)		Citizenship
Given Name (first and middle [if any])		Family Name or Surname
Full Post Office Address		
Residence - City, State/Country (if different from PO address)		
SIGN AND DATE HERE Inventor's Signature		Date